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HOMŒOPATHY

IN

1869.

AN ESSAY ON THE ORIGIN AND PRESENT POSITION OF THE LAW OF SPECIFIC DRUG-HEALING.

BY

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PREFACE.

To render the sketch of any new branch of philosophy complete it is desirable to commence with a short history of its founder and of its foundation; for the capability and credibility of the witness have no slight bearing on the value of his scientific testimony. When relating the facts upon which the science of Homœopathy is based, it is, therefore, important that we should acquaint ourselves, to some extent, with the man who observed and recorded them. It is also desirable that we should compare his testimony with that of other independent observers, and thus sift the statements which he has laid before us.

With this end in view, I have, firstly, given an outline of Hahnemannn's life, and to avoid all bias of partizanship, I have reprinted the account of his eventful career from a popular Encyclopædia, adding only that which it lacked in the relation of its closing scenes. And, secondly I have recorded the facts on the observance of which he founded his system, and have compared them with the experiments of eminent medical authorities of our own day. I have preferred this style of critical enquiry to that which has usually been adopted, (the statistical,) because its arguments are less open to objection than those founded on an appeal to vital statistics, while in taking a line of argument founded on observed and admitted facts, I stand upon neutral ground, equally frequented and believed in by all schools of medicine.

But I do not the less believe in the statistics which have hitherto been advanced. I have examined into many of these, and have found them reliable and trustworthy, particularly those of Dr. TESSIER, by whom Homœopathy was practised, on a large scale, and for many years, in the Hôtel Dieu, in Paris,* side by side with the ordinary practice of other physicians. Here all circumstances were equal, patients were treated in the same city, under the same roof, and with the same regulations of admission, and any selection of cases was impossible. The result shewed that, in the Homœopathic wards the mortality was less, the recoveries were more rapid, and the expense greatly diminished.

Somewhat similar, too, were the statistics of Dr. LIAGRE,† at Roubaix, Nord, France. He compares the results of his former treatment with that of his present Homœopathic treatment, in the same public hospital, during a succession of years. He found that he saved more human life, and his patients recovered more quickly and at less cost than when he treated them in the ordinary manner.

I merely allude to the statistical line of argument to explain that my not having taken it up in these pages is not because I do not think it strong or trustworthy, but because I think that the argument founded on a critical enquiry into facts is much stronger and is less open to cavil or objection.

BRUNSWICK LODGE,
NORWICH,
March, 1869.

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* See Monthly Homœopathic Review, vol. 2, p. 621.

† For a full report see *British Journal of Homœopathy*. vol. xxiv., 1866, page 17. The *ordinary treatment* showed 19·26 per cent. mortality. The *Homœopathic treatment* shewed 13·31 per cent. mortality.

HOMŒOPATHY IN 1869.

INTRODUCTION.

A SHORT BIOGRAPHICAL SKETCH OF HAHNEMANN.

The following short biography of Hahnemann is taken from *Chambers' Encyclopædia.*

"SAMUEL HAHNEMANN, a celebrated German physician, was born in 1755, at Meissen, a small town in the neighbourhood of Dresden, the capital of Saxony. His father—a painter of the ware known as Dresden china—intended his son to follow his own occupation, but the boy displayed so ardent a love for letters that the head master of the college (Fürstenschull) of Meissen, afforded him gratuitously all the advantages of that institution, and he remained at it till he was twenty years of age. He then left Meissen with twenty crowns as his whole fortune, and went to Leipsic to prosecute his medical studies. Here he maintained himself by translating works out of Latin, French, and English, into German. By his industry and frugality he saved enough of money to enable him to visit Vienna, where, under the direction of Dr. Quarin, he pursued his studies, and after various vicissitudes of fortune he returned to Saxony, and settled in Dresden in 1784. Here he discovered a new salt of mercury, known by the name of *Mercurius Solubilis Hahnemanni*, and still extensively employed by physicians in Germany. He also published a monograph upon arsenical poisoning, which is distinguished by such accuracy of observation and clearness of diction as to be quoted with approval by Christison and other modern toxicologists. After spending four years in Dresden, where he had for a time the direction of a large hospital, he returned in the year 1789 to Leipsic. In the following year, while translating Cullen's *Materia Medica* out of English into German, his attention was arrested by the insufficient explanations advanced in that work of the cure of ague by Cinchona bark. By way of experiment, he took a large dose of that substance to ascertain its action on the healthy body. In the course of a few days he experienced the symptoms of ague; and it thus occurred to him that perhaps *the reason why Cinchona cures ague is because it has the power to produce symptoms in a healthy person similar to those of ague.* To ascertain the truth of this conjecture, he ransacked the records of medicine for well-attested cures effected by single remedies; and finding sufficient evidence of this fact, he advanced a step further, and proposed, in an article published in *Hufeland's Journal*, in the year 1797, to apply this new principle to the discovery of proper medicines for every form of disease. Soon afterwards he published a case to illustrate his method. It was one of a severe kind of colic cured by a strong dose of *veratrum album*. Before this substance gave relief to the patient it excited a severe aggravation of his symptoms. This induced Hahnemann, instead of drops or grains, to give the fraction of a drop or grain, and he thus introduced *infinitesimal* doses. Some years later he applied his new principle in the treatment of scarlet fever; and finding that belladonna cured the peculiar type of that disease, which then prevailed in Germany, he proposed to give this medicine as a *prophylactic*, or preventive against scarlet fever; from that time it has been extensively employed for this purpose. In the year 1810 he published his great work, entitled *Organon of Medicine*, which has been translated into all the European languages, as well as into Arabic. In this book he fully expounded his new system, which he called Homœopathy. His next publication was a *Materia Medica*, consisting of a description of the effects of medicines upon persons in health. These works were published between the years 1810 and 1821, at Liepsic, where he founded a school, and was surrounded by disciples. As his system involved the administration of medicines, each separately by itself, and in doses infinitely minute, there was no longer any need of the apothecaries intervention between the physician and the patient. In consequence of this the Apothecaries Company brought to bear upon Hahnemann an Act forbidding physicians to dispense their own medicines, and with such effect that he was obliged to leave Leipsic. The Grand Duke of Anhalt Köthen appointed him his physician, and invited him to live at Köthen. Thither, accordingly, he removed in the year 1821, and there he prepared various new editions of his *Organon*, and new volumes of his *Materia Medica* for publication. In 1835 he married a second time; his wife was a French lady of considerable position; and in the same year he left Köthen, and settled in Paris, where he enjoyed a great reputation till his death, which took place in the year 1843.

On the centenary of his birth year, in 1855, a statue was erected to his honour at Leipsic, at the expense of his disciples in Germany, France, England, and other countries, with the concurrence of the local authorities, who supplied the site in one of the public places in their handsome town. Hahnemann is universally acknowledged to have displayed great genius, industry, and erudition. Jean Paul Richter calls him "a prodigy of philosophy and learning." He was a man of unblemished purity of morals, and his life, as well as his writings, was characterised by strong natural piety. He left a numerous family of sons and daughters."

To complete this picture of HAHNEMANN, let us record the manner of his death, and thus add, as it were, the pinnacle to the temple of his fame.

Jahr, writing from Paris, on the 4th of July, 1843, says:—" Hahnemann is dead! I saw him for the last time on the 10th of April. My visits to him had been few, owing to my professional engagements. About the 15th of April he was seized by an attack of bronchitis. His wife admitted nobody. It was several times announced that he was dead; happily that was a mistake. I had for some time intended to call upon him, when I received a note from Mde. Hahnemann requesting me to call that very day. I did so. But you may imagine the mournful spectacle. I found, instead of the dear old man, his wife stretched on his bed, bitterly weeping by his side; himself, now cold, had departed four hours before, to that land where there is no struggle, disease, nor death. In fact, dear friends, our venerable father had finished his career. A pulmonary paralysis had set him free, after an illness of six weeks, eventually liberating the soul from its earthly tenement. To the last moment he was in the possession of his mental powers. Although his words were inaudible, his broken expressions manifested the clearness and composure of his mind. In the commencement of that illness he announced that it would be his last as his body was worn out. He was exceedingly rejoiced by the arrival of his widowed daughter, Mrs. Süss, receiving her in the warmest manner. At first he prescribed for himself; and nearly to the period of his death delivered his opinion of the remedies offered him by his wife and Dr. Chartran. He only suffered during his last moments, when the asthma increased. When his wife, on account of a fit (of suffocation), said to him, 'Providence ought to exempt you from these sufferings, as you have relieved so many, and endured such numerous persecutions;' he replied, '*Me: why me? Every one works according to the abilities and power which Providence has bestowed upon him. Superiority or inferiority exists only before the tribunal of man, not before that of Providence. Providence owes nothing to me, but I am indebted to Providence for all.*'

"We leave these memorable words for every one to deduce from them the natural conclusion, and especially for the illustration of the character of Hahnemann." *

Thus died Hahnemann, in the 88th year of his age, after a life of marvellous industry and perseverance. His great intellect continued undimmed by age. One who saw him at a festival, given in honour of his genius on the attainment of his 83rd year, says he was then "a man apparently of 63 rather than 83 years of age." Further on, the same writer says, "Hahnemann spent the evening of his life apart from political agitation, free from the weakness of age, bent upon the advancement of his system, aiding physicians as much as possible by advice and assistance, enjoying the society of a few intimate pupils, and corresponding with his daughters at Köthen. The decline of his life was a brilliant sunset. Who could endure to darken this bright picture by the thought of death?"

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* A Biographical Monument to the Memory of Samuel Hahnemann, page 73. London: Leath and Ross.

At this time, when most men would have found, in their years, an excuse for retirement, Hahnemann was full of activity and benevolence; not only did he continue the practice of his profession, from which he was then deriving the immense income of 200,000 francs a-year, but his "vestibule and stairs were filled with poor people, whom he advised gratuitously."

The possession of vigorous intellect and great bodily powers to his 88th year are an excellent practical commentary on Hahnemann's skill as a physician, and a kind of evidence in favour of the system of medicine he adopted. He is said to have entered on his Parisian medical career with the modest capital of 50,000 francs, having distributed the rest of his fortune among his family. The grand old man, at 80 years of age, launched himself upon a new sphere of action in the capital of France. In three years, we find him making an income of 200,000 francs (£8,000 sterling) a-year from his professional exertions, and giving gratuitous advice to crowds of the poor. Year by year his wonderful successes brought him a rapid increase to even this large income. In his 88th year he died, and is stated to have left a fortune of 4,000,000 of francs (£160,000,* see *British Journal of Homœopathy*, vol. xxiii., p. 664), the whole of which, with the exception of the small sum above named, was accumulated by his incessant toil and labour during the last eight years of his life. I doubt whether the History of Medicine can afford any parallel to this wonderful industry and success at so advanced an age.

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* I have made special enquiry as to the truth of this statement, which it appeared to me must contain some error, but I am informed by a near relative of Hahnemann's that it is worthy of credit. It is probable that, in addition to the large fees which would be paid to so eminent a man, he also received gifts from wealthy and grateful patients.

His death was worthy of his life, and his last wondrous eight years of lavishly remunerated toil, form a brilliant pendant to the struggles of his early youth, when his "ardent love of letters" so won upon his schoolmaster that he retained him, a gratuitous pupil, until he was twenty years of age; a wonderful contrast these last years of splendour to the early "battle for bread" of the student who started on his career in search of knowledge with twenty crowns in his pocket; who supported himself by translating standard works into German until he had completed a thorough and first-class education for himself at the Universities of Leipzic and Vienna.

Few medical students can show so toilsome and laborious a climb up their Parnassus. None in the History of Medicine have received so worthy an oracle as the reward of their toil; none have been the means of conferring so priceless a boon on their fellow men; few have accumulated so large a fortune. And we doubt whether any physician ever ended his days in so glorious a sunset, or in a surer hope for the future.

HOMŒOPATHY:

ITS

SAFETY, RAPIDITY, AND PLEASANTNESS OF CURE.

ASCLEPIADES, of Bithynia, practised medicine in Rome during the splendour of its early empire, in the first century of the Christian era. He attained great popularity and success as a physician, from the simplicity of his remedies no less than from the rapidity of his cures. His maxim was that a physician ought to cure his patient "SAFELY, QUICKLY, and PLEASANTLY."

In estimating the value of any SYSTEM OF MEDICINE, we may accept this maxim of Asclepiades as a test of its reality.

The system which most safely, most quickly, and most pleasantly cures the patient has the strongest claim to the title of the Art of Healing.

In briefly reviewing the medical system, founded upon the doctrine and practice of Hahnemann, we shall follow the pointings of this maxim, and enquire into the safety of its remedies, the rapidity of its cure, and the pleasantness of its administration.

Afterwards, we propose to enquire into the prevalent ideas and practice of those physicians of the present day who are practising Homœopathy.

And lastly, we shall proceed to a consideration of the relation in which Homœopathy stands to the Science of Medicine generally.

In discussing THE SAFETY OF HOMŒOPATHIC REMEDIES, we must to some extent recapitulate, and briefly relate the first of that series of physiological experiments upon which Hahnemann based his system.

In the short sketch of Hahnemann's life, prefixed to this pamphlet, we have seen that he was a God-fearing, painstaking, and conscientious physician of great talent and genius, who, by much study and long travel, had striven to perfect himself in the Art of Medicine.

Having employed, to the uttermost, the opportunities he had enjoyed of seeing disease under its varied types in many parts of Europe; having an intimate acquaintance with all, of worth, that had been written on medicine in his own country and time; having himself translated many standard works on medicine, from other languages, into German, Hahnemann found nothing but disappointment at the poverty of the means of cure which existed, and despair at the chaos of speculations and baseless theories which were presented in the Materia Medica of his age.

In the year 1790 Hahnemann (being then forty-five years of age,) was engaged in translating Cullen's Materia Medica. He was struck with the unsatisfactory nature of the attempted explanation of the action of Cinchona bark in the cure of ague.

That BARK *cures* AGUE is an undoubted fact, but how does it cure the disease?

It occurred to Hahnemann that the absence of all scientific explanation of the action of this drug might be from the want of knowledge of the positive effects of the drug upon the healthy constitution. Hence he proposed to himself to discover the medicinal action of

Cinchona by an experimental trial of its effects upon himself.

Haller, the learned Professor of Medicine in the University of Göttingen, a man of extraordinary industry and research,[*] who died in 1777, had already proposed a method of experimentation for the attainment of such knowledge in respect to medicinal drugs, in the following words:—"In the first place," said he, "the remedy is to be tried on the healthy body; without any foreign substance mixed with it; a small dose is to be taken; and attention is to be directed to every effect produced by it; for example, on the pulse, the temperature, the respiration, the secretions. Having obtained their obvious phenomena in health, you may then pass on to experiment on the body in a state of disease."[†]

But hitherto this proposition of Haller's had remained a dead letter. So studious a physician as Hahnemann was probably well acquainted with this and the other writings of the eminent Haller, then but recently deceased. He determined to experiment in the manner above indicated with bark; and while in perfect health he took several doses of powdered Cinchona bark, in all amounting to half an ounce.

In a few days he experienced the *symptoms of an ague.* He had interrogated Nature rationally, and had received an immediate and decided answer. Bark, which cured ague when present, caused a train of symptoms similar to those of ague when the drug was administered to the healthy.

The observation of this singular property in bark suggested to Hahnemann's mind that every other drug might, perhaps, equally prove a specific for some disease, and that the key to discover the specific curative powers of a drug might lie in the knowledge of its poisonous properties. To ascertain the truth of this supposition he devoted himself to the careful investigation of the effects of medicinal drugs when administered to the healthy human body. During forty years he carried on a series of well-planned and well-executed experiments into the disease-producing-power of drugs when administered to persons in health. He found that in the symptoms produced by drugs there was a certain similarity to those induced by idiopathic disease. In the correlation thus established between the effects of diseases and the effects of drugs, (bearing in recollection the correlation previously proved between bark and ague,) Hahnemann believed that he had discovered the true law of specific drug-healing, which he expressed by the formula "Similia, Similibus Curantur."

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[*] Haller is said to have written 86 books on medical subjects, and to have contributed 12,000 articles to literary journals.

[†] *See Dr. Sharp's Essay on the Physiological Action of Medicines.* Monthly Homœopathic Review, vol. x., p. 584.

It is difficult to overrate the importance of this discovery of Hahnemann's in establishing the fact that medicinal drugs have not only a *curative power*, but also a *disease-producing-power*, when given in ordinary medicinal doses, or doses a little fuller than those commonly given.*

The bearing of this experiment on the question of SAFETY in the administration of remedies is obvious. If drugs be capable of inducing artificial diseases, their administration must be so conducted as to avoid this danger: they must be given in the smallest dose in which they will cure. If ten grains of a drug be given where one grain will suffice for cure, then the other nine grains will be free to act injuriously upon the patient, and thus may induce an artificial drug disease.

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*It also contained, as a corollary, an entirely new theory of disease directly opposed to that held by the schools of his day. A full consideration of the facts which were developed during his experiments forced Hahnemann to the conclusion that disease did not consist of something material added to the body (as was the theory of his time), but that disease was the natural consequence of a loss of vital force, or a loss of balance of the vital forces within the body. Thus Hahnemann's system proposed a complete revolution in the Science of Medicine, both in Therapeutics and Pathology.

If fifty grains of bark suffice to cure a patient afflicted with ague, then, if 500 grains have been given, it is clear that the 450 grains remaining in the system in excess of the curative dose may, and probably will, induce medicinal disease, and so prolong the patient's ill-health, or even preclude recovery.

Does the concurrent testimony of further facts and of more extended experiments prove this logical deduction from Hahnemann's great experiment? Yes. In Dr. Dyce Brown's appendix to Dr. Reith's recent pamphlet on *Homœopathy, its nature and relative value*, we find the following extract from a great medical authority, Trousseau and Pidoux, *Traitè de Thérapeutique*, &c., 7th edition, 1862.

> "Each day's observation," says M. Bretonneau, "proves that Cinchona, given in a large dose, determines in a great number of subjects a very *marked febrile* movement. The characters of this fever, and the time when it shows itself, vary in different individuals; oftenest, tinnitus aurium, deafness, and a species of intoxication precede the invasion of this fever; a slight *shivering* then occurs; a *dry heat*, accompanied by headache, succeeds to these first symptoms; they gradually abate, and end by sweat. *Far from yielding to new and higher doses of this medicine, the fever produced by Cinchona is only exasperated.*"

Commenting on this testimony of M. Bretonneau, who was in his day one of the most eminent of French physicians, MM. Trousseau and Pidoux continue:—

> "But if strong doses are renewed each day, and continued during a long time, besides the stomach pains of which we have spoken, there manifests itself a species of *fever* exactly indicated by M. Bretonneau, and *which affects an intermittent type*, when the Cinchona is given in an intermittent manner. *This fever is a species of vicious circle, in which very often inexperienced physicians turn, who are ignorant of the action of Cinchona; they redouble the doses of the medicine, and throw the patient into a state which may be very serious.*" *

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* The rapidity with which quinine and other drugs penetrate into every texture of the body has been proved by the experiments of Dr. Bence Jones, Dr. Dupré, and others, and will be found detailed in the chapter on "Modern Medicine," at the latter part of this pamphlet.

The three observers who thus fully corroborate the truth of Hahnemann's great experiment are well known medical authorities, as highly estimated on our side of the Channel as in France.

Hahnemann was the first to recognise this special danger included in the administration of medicinal drugs in large doses, and to avoid it he proposed a method of dispensing and administering medicines by which their curative properties could be used with entire freedom from the smallest danger of the occurrence of such complications of disease and remedy as those above-mentioned.

The means he suggested are as simple as they are practical. If the crude drug be dangerous, dilute it down with some non-medicinal substance to such a point as to make danger impossible, and give it in such doses as would be innocuous to a healthy man. By this system a point is easily reached at which the most deadly-poisonous drug becomes perfectly freed from all disease-producing properties, while its *healing power* remains untouched.

If a comparatively mild medicine, such as bark, is yet potent to produce a "vicious circle in which inexperienced physicians turn," until they "throw the patient into a state which may be very serious," what may not be the results from the continued large doses of the more violent drugs which abound in every ordinary prescription? What havoc may not result from a "vicious circle" of strychnine or of atropine; of morphine or colchicum; of opium or colocynth; of arsenic or prussic acid; or of any other of the numerous and powerful drugs of the British Pharmacopœia of 1867, when given in the doses ordinarily sanctioned? That which is true of bark and quinine, is equally true of every other medicinal substance in the whole

Pharmacopœia. Each drug has its own specific disease-producing power in the large dose, just as it has a disease-curing power in its minute dose. The SAFETY of the Homœopathic remedies consists, simply, in the minuteness of the dose. Hahnemann's system of dilution gives *absolute safety* to his system of medicine; and Homœopathy, therefore, may claim, without challenge, to possess, eminently, the first essential point in the wise maxim of Asclepiades of Bithynia.

Homœopathy asserts that the proper dose of a medicine is that which is sufficiently powerful to heal the disease *without injury to the patient.*

We next come to a consideration of

The Rapidity of the Homœopathic Cure.

Since medicinal drugs have the power of inducing a medicinal disease on the healthy body, it is evident that if we give a larger quantity of a drug than is required for the cure of the patient, we shall not only not cure him, but we shall prolong his state of unhealth in proportion to the excess of the dose. Admitting that large and frequently repeated doses of a medicinal drug have cured the disease, the patient still has more or less of medicinal disease left in his system from the excess of medicinal power employed, and those physicians who are ignorant of this fact are misled by these medicinal symptoms into a belief that although the disease has driven out of one part or organ, yet that it has fastened on another, and that further or increased medicinal dosing is required to cure these new symptoms; whereas all that is really required for his cure is to let the patient alone, or to give an antidote for the medicinal poison which is acting within him. MM. Trousseau and Pidoux pointed out that when the doses of bark or quinine, given for the cure of an ague, have been too large, or have been too frequently administered, the quinine or bark which has been given in excess of the demands of the disease induces an artificial ague which will never be cured by quinine, but on the contrary, will be perpetually increased by a continuation of the same drug. In like manner we find, in all other diseases, that any *excess* in the dose of a *right remedial-drug*, equally prolongs the patient's unhealth, and the physician, ignorant of this power of drugs to induce artificial disease, goes on in a "vicious circle," slowly poisoning his patient, until he throws him "into a state which may be very serious."

A system of medicine which is based on giving minute and often infinitesimal doses of drugs, avoids this danger. Its doses are so small as to be absolutely innocuous to the healthy body. Moreover, a system which gives drugs only in these non-pathogenetic, *i.e.*, non-poisonous doses, too small to produce artificial or drug-disease; which recognises disease by its objective and subjective symptoms and signs; which prescribes medicines solely in accordance with the objective and subjective symptoms and signs, and which ceases to administer medicinal drugs so soon as the objective and subjective symptoms and signs are removed, cannot, by any possibility, induce medicinal or artificial disease. Hence the physician who uses such a system of medicine must always cure his patient and heal disease in the shortest possible time, provided he gives the appropriate medicine.

Such a system is found in Homœopathy when its remedies are used, as Hahnemann directed, in very minute or infinitesimal doses. If a medicine be administered which is truly Homœopathic to the disease, in infinitesimal or very minute doses, and is continued only so long as the symptoms (objective and subjective) of the disease are present, we shall find that this *Homœopathic practice necessarily cures rapidly as well as safely.* The importance of this part of our subject in its bearing on the relative rapidity of Homœopathic cures, induces us to enter still more fully into the alleged fact, that large doses of quinine often leave ague patients uncured; this has been observed by many physicians beside those before-named. The late Dr. GOLDING BIRD, in his work on Urinary Deposits (4th ed., p. 435), thus writes:—

> "*In Ague* nothing is more easy, as every one is aware, than to check the paroxysms by means of anti-periodics, especially quinine, and in many cases the patient is really cured by the remedy. But any one who has had an opportunity of seeing much of the effects of marsh miasmata, is perfectly aware that if a patient has long been exposed to their influence, *although his paroxysms of ague may be for a time checked with quinine or arsenic, the unhealthy state of the blood is not removed.** *The sallow aspect, the depressed health, the visceral engorgement, all indicate that the poison still remains in the system, and is continuing its work*, although its influence has been blunted by our remedies. After a time, however, imperfect paroxysms, the "dumb ague" as they are often graphically called by the patient, appear again, requiring the anti-periodic to check their further development. This is a common history, and many patients are thus not absolutely freed from miasmatic poison for months or years."

This "dumb ague," which Dr. Golding Bird so clearly describes, with its "sallow aspect, depressed health, and visceral engorgement, is now known to be no ague at all, but is, in reality, slow *quinine or arsenical poisoning.* The over-dosing with quinine or arsenic (not the ague) is the "*poison which remains in the system, and is continuing its work.*" Hahnemann showed this fact more than fifty years before DR. GOLDING BIRD wrote. *Dr. Bretonneau*, as we see in the extract already quoted, knew and appreciated this poisonous property of large doses of quinine in more recent times. *Drs. Trousseau* and *Pidoux*, in our own day, fully admit its truth in their great work, as shown above.

Dr. GOLDING BIRD's own experience also confirms the view that the so-called "dumb-ague" is caused by over-doses of quinine, for he proposed to cure it by eliminating doses of acetate of potash and small doses of mercury. The effect of this treatment would be to carry the quinine or arsenic out of the system, through the action of these two medicines on the kidneys and liver. On page 418 (op. cit.) Dr. Golding Bird says:—

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* The Italics are my own.—W.B.

> "We have, however, some evidence that certain organic matters easily decomposed are really occasionally excreted from the kidneys unchanged; thus *quinine*, daturine, and some other of the vegetable alkaloids are thus carried off in the urine."

Bearing this fact in mind, (the excretion of quinine from the kidneys unchanged,) let us read what the same author says on p. 436 (op. cit.) on the effects of acetate of potash (a powerful diuretic) on patients suffering from what he calls "dumb ague," but which we now know to be "quinine fever."

> "I do not claim for the acetate of potash the virtues of an anti-periodic, but I do unhesitatingly declare that it will effect that which quinine and its allies cannot do."
>
> "When to a person suffering from the effects of marsh malaria, this drug has been administered to the extent of two drachms in the course of twenty-four hours largely diluted, and continued for two or three weeks, not only is no injury effected by the remedy, but the most marked benefits are observed to result. The patient's skin becomes less dusky, the expression more healthy, the dull aspect of the eyes is changed for cheerfulness, the engorgement of the liver and spleen lessens, and the paroxysms of 'dumb ague' disappear, or merely require a few doses of arsenic for their complete cure, and thus to effect the complete restoration of the patient. Even in recent tertian ague, in which the paroxysms are well marked and even violent, I have hardly ever administered the acetate of potass without observing a diminution in the intensity of the attacks, and a considerable prolongation in the intermissions. *Indeed, when quinine has been administered for the purpose of at once checking the ague fit, the subsequent administration of the acetate will not only prevent a relapse but greatly improve the patient's general health.*"

Let us carefully examine this train of facts.

In those cases of ague, in which large doses of quinine have been given, the sequence of symptoms, denominated "dumb-ague," disappear in two or three weeks, if the action of the kidneys is increased during that time by the administration of a diuretic. Next we learn that quinine is one of those medicines which can be carried out of the body through the kidneys, being thus excreted in an unchanged state.

Further, it is stated that "even in recent tertian ague," "when quinine has been administered," the free action of the kidneys "will not only prevent a relapse, but greatly improve the patient's general health." Looking at these facts through the light of our knowledge of the physiological action of quinine, we easily explain the whole train of their operation thus:—

An unnecessarily large dose of quinine has been given to the patient. The ague is cured. In its place the patient suffers from the peculiar fever induced by the over-dose of quinine. The acetate of potass, by increasing the action of the kidneys, casts the excess of quinine out of the system, and then the patient is well. The original disease was cured by the quinine. The quinine fever ceases, when the patient is freed from the quinine.

But, as a further proof of this view; some cases, we are told, "require a few doses of arsenic for their complete cure." That is to say, the kidneys are still unable to eliminate the whole of the quinine, and in these cases arsenic, which is an antidote to slow quinine-poisoning, completes the cure.*

I have dwelt thus long on the question of the cure of ague and quinine-poisoning, because its whole facts are vouched for by men of eminence in the profession, whose authority is acknowledged.

Drs. Golding Bird, Bretonneau, Trousseau, and Pidoux, are all recognised medical authorities, and their testimony is, therefore, free from all suspicion of bias.

Dr. Golding Bird adds—

"I believe the most successful practice, especially in the treatment of cases of ague *which have resisted long courses of anti-periodics*, consists in the administration of *minute doses* of a mild mercurial contemporaneously with the acetate of potass."

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* Where "dumb ague" results from overdosing with arsenic, quinine is the antidote.

Read by the light of our present knowledge we should transpose the above passage thus, *that the most successful practice in the treatment of cases originally of ague, where the patient has been slowly saturated with quinine, consists in stimulating the liver by minute doses of mild mercurials, and the kidneys by mild diuretics, to enable them to eliminate and cast out the drug which has caused and is sustaining an artificial disease in the system.*

If the cure of an ague, for which quinine in large doses is given, be expedited by the quick elimination of the quinine, unchanged, from the system, it is obvious that the cure would have been more rapid if far smaller doses of quinine had been given in the first instance; by this course the time afterwards consumed in eliminating the quinine would have been saved.

If a chemist desire to change a given quantity of a solution of carbonate of soda into the neutral salt of citrate of soda, he would use just such a proportion of citric acid as would suffice to neutralize the alkali. In this way he would attain his result in the shortest possible time. If he were to add twice as much citric acid as was required, it is evident that he would delay the desired result, because he then must add more of the carbonate of soda in order to neutralize the excess of citric acid.

Rapidity in the chemical result would depend on the nicety of the proportion of citric acid used in the first place.

So also in the cure of a case of ague, the rapidity in the curative result would be contingent on the exact relation of the quantity of quinine (or other specific) given, to that of the amount of disease to be combatted.

The *rapid cure* of a disease must depend, among other things, 1stly, on the exactness in the correlation of the remedy to the symptoms of the disease, and 2ndly, on the exact balance of the medicinal force employed, to that of the disease force or want of force to be opposed or to be compensated for.

Bearing upon the second of these two indications, we would draw attention to Sir Thomas Watson's testimony as to the imponderable and impalpable nature of the poison which causes ague. He shows that the water of malarious districts has been "analysed again and again with a view to the discovery of this pestilential agent, but in vain." That the air has been examined "carefully and repeatedly by expert chemists, and with the same want of success. The poisonous principle eludes the test of the most delicate chemical agents" (See Lectures on the Practice of Physic, 2nd ed., vol I, p. 712.)

Hence we may fairly argue: If an impalpable and imponderable agent, too infinitesimal in its materiality to be discovered by the most powerful microscope, or the most delicate chemical agents, is yet powerful enough to prostrate the strongest man with ague, there is, at least, an antecedent probability that a medicinal agent, equally impalpable, equally imponderable, equally undiscoverable by chemist or microscopist, not only may be capable of curing the ague thus caused, but *will be* the appropriate means for its most rapid cure. We might as well wield a sledge hammer to kill a fly on a pane of glass as use large material doses of a medicinal drug to cure a disease caused by infinitesimal agency.

During my residence in Cambridge I had many opportunities of applying the above principles in the cure of ague. Experience fully bore out their value. I tabulated 75 cases, which were published with remarks in the first volume of the "Homœopathic Annals and

Transactions, p. 441." These cases were treated by me in the early years of my study of Homœopathy, but they sufficiently show the power of infinitesimal doses for the cure of this complaint. Many of them were treated at the Dispensary, and the remainder in my private practice. The result of all is not known, as many Dispensary patients, from a distance, do not return to report themselves when they are cured. The general result showed that 58 were known to be cured; two cases left the Dispensary, and afterwards died under other treatment. (In both these cases there were serious complications and extensive organic disease; one had been for two years under ordinary care, and had bronchitis, enlarged spleen, and dropsy, when I first saw him; the other had chronic dysentery and nephritis, and had for many years been under a course of ordinary treatment.) Of the cases cured I would note the following: (36), a patient, æt. 57, quotidian ague, was cured in a week by china, third dilution. (47), a female, æt. 32, tertian ague, was cured in a week by half drop doses of china, third decimal dilution, given every four hours. (48), female, æt. 47, quotidian ague, severe, was cured in two days by china, third dilution, half a drop every four hours. (52), a male, æt. 45, slight tertian, cured by china, third decimal dilution, in four days. (69), a male, æt. 53, quotidian, subacute, cured in a week by china, first decimal, three drops twice a day.

More recently a patient consulted me about an ague, in which the ague fit came on at night; the different stages were not well marked; fever, chills, and perspirations were mingled, but there was constant heat and dryness in the throat. He had been a long time under ordinary treatment, during which quinine had been taken, and some other anti-periodics, without any relief. I gave him a few doses of arsenicum, third dilution. At his next visit he reported himself cured. His own expression was, that an hour after the first dose he began to feel better.

To a man who has not studied the subject of infinitesimals; to one who has not a practical acquaintance with the facts that are involved in a consideration of the natural history of diseases; to one who does not recognise the application of dynamics to medicine, it seems incredible that doses of the size of one millionth part of a grain of arsenicum should suffice to cure a disease which had refused to yield to large doses of quinine. But however incredible a fact may appear, we must accept it unless we can disprove it. This was no solitary case. Many similar cases have been treated by me with a like success, where the other circumstances of the case were equal.

It is not sufficient to combat facts by theories founded on the observation of a wholly different series of facts, yet this has been the very illogical method of many physicians when dealing with the subject of Homœopathy. It is unscientific to reject observed facts simply because we are unable to account for all their aspects by theories. We ought to accept such facts as stand the test of repeated experimental observation, and to seek diligently for new theories to fit them, if our old theories do not meet them.

THE PLEASANTNESS OF HOMŒOPATHIC REMEDIES.

The third point in the maxim of Asclepiades, of Bithynia, is that the physician ought to cure his patient *pleasantly*.

"A pleasant cure" may be viewed in two aspects:— 1stly. As to the taste of the medicines employed. 2ndly. As to their effects.

With respect to the first aspect. By Hahnemann's system of dilution the drugs become either tasteless, or the taste is so far removed from them that they are no longer nauseous or disgusting. This is so obvious and so well known that we need not pursue the subject. In their second aspect also, viz.:—In the effects of the Homœopathic drugs on the patient, their action is unaccompanied by any new disturbance of function, or by the imposition of any new symptom. Hence the only effect induced by the Homœopathically chosen remedy, if it be applied according to the rules of the Homœopathic art, will be the gradual subsidence and extinction of the symptoms of the disease. In fact, the only consciousness on the part of the patient that he has taken Homœopathic medicine for a disease should be the removal of the pains, the sensations, and the malaise which constitute the disease.

It is impossible for a physician to cure *more pleasantly* than in this innocuous manner.

IS HOMŒOPATHY THE WHOLE ART OF HEALING?

Will Homœopathy cure all disease? Is it the sole system of cure? Does the administration of medicines in accordance with the Homœopathic law include the whole art of Healing?

To these questions, both Hahnemann's writings, and the theory and practice of those physicians of the present day who practice Homœopathy, answer No.

Homœopathy is the safest, quickest, pleasantest, and most permanent mode of specific drug-healing, but it does not profess to be the one and sole thing needed to heal all diseases.

In a foot note to Proposition vii., in the *Organon*,* Hahnemann says:—

"It is not necessary to say that every intelligent physician would at once

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* Dudgeon's Translation from the Fifth German Edition—p. 113.

> remove this (the manifest, exciting, or maintaining cause of a disease) where it exists; the indisposition thereupon generally ceases spontaneously. He will remove from the room strong smelling flowers, which have a tendency to cause syncope and hysterical sufferings; extract from the cornea the foreign body that excites inflammation of the eye; loosen the over-tight bandage on a wounded limb, and apply a more suitable one; lay bare and put a ligature on the wounded artery that produces fainting; endeavour to promote the expulsion, by vomiting, of belladonna berries and the like that may have been swallowed; extract foreign substances that may have got into the orifices of the body, (the nose, the gullet, ears, urethra, rectum, vagina); crush the vesical calculus; open the imperforate anus of the new born infant, &c."

In the same way poisons are to be met by the administration of their appropriate antidote in such doses as may be needed to antidote them; or they may be voided by emetics or the stomach pump. Obstructions from fœcal matter in the bowels, if refusing to yield to the appropriate specific medicine, and if causing inconvenience or disease, must be removed by enema or some mild purgative; the skin must be kept clean in skin diseases; fomentations and bathings may be used to subdue congestive, inflammatory, or spasmodic conditions.

Impurities in the air breathed by the patient or in the water drunk must be removed. Diet of an appropriate character must be prescribed according to the nature of the wants of the case.

Mental and spiritual influences of a healthy tone and character may perhaps be demanded. This, too, was recognised by Hahnemann. At page 119 of the *Organon* (5th Edition) he gives the following illustration in a foot note:—

> "A warning dream, a superstitious fancy, or a solemn prediction that death would occur at a certain day, or at a certain hour, has not unfrequently produced all the signs of commencing and increasing disease, of approaching death, and of death itself, at the hour announced, which could not happen without the simultaneous production of the inward change (corresponding to the state observed externally)."

He points out that in these cases we must administer strong moral support, and combat the morbid belief by "persuasion to a belief in the contrary," and thus cure the patient by a moral agent.

I instance these as a few of the many means by which the Art of Medicine teaches us to heal our patients, in addition to drug giving. These means are common to all systems of medicine, and are well recognised and successfully applied by all intelligent and thoughtful physicians. It is the part of their art to surround their patients with pure and health-bearing influences, mentally and physically, so that spirit, soul, and body may all act harmoniously together in the direction of a return to that balance of mental and bodily functions which we call health.

Pure air, *pure* water, *wholesome* and appropriate food, are essential to pure blood. *Pure* blood is essential to the healthy nutrition of the whole frame—bone, muscle, and nerve. It is doubly essential to ensure the purity of these external materials to the invalid, in order to obtain a perfect restoration to health.

In addition to these essentials, physicians practising Homœopathy hold that *pure* medicines must be given, if any medicines are required. It is of little use to purify the air, to purify the water, and to order the most wholesome and cleanly diet, if we foul the blood with unclean drugs. From this hygienic and dietetic point of view, if from none other, we should be driven to give medicinal drugs in a cleanly, pure, and minute preparation.

No medicines can be more *pure* than those administered in Homœopathic pharmacy. For the most part they have neither colour, nor smell, nor taste; it is impossible to foul the blood with them, or to clog the wheels of life with them. Hence 'cæteris paribus' there must be a great advantage in their use, since they act in the same direction as the hygienic and dietetic means universally admitted by all physicians to be essentials in the armamenta of the Art of Healing.

THE MODERN PRACTICE OF HOMŒOPATHY.

HOMŒOPATHY, as elaborated by Hahnemann, consists of two parts, the Practical and the Theoretical.

HAHNEMANN'S facts remain the basis of Homœopathic practice, and will always so remain. His theories have provoked much discussion. He saw reason himself to modify them to some extent in his later years. The state of knowledge of the collateral sciences was not sufficiently advanced in Hahnemann's day to allow a truly scientific explanation of the facts revealed by his experimental observations. Even at the present time any theoretical explanation of the action of Homœopathic remedies, which our more advanced state of scientific knowledge may prompt us to hazard, must be put forward tentatively, cautiously, and with great diffidence.

BACON says, in his "Essay on Innovations," "As the births of living creatures at first are ill-shapen, so are all innovations which are the births of time."

Homœopathy is a grand innovation on the art of medicine. At its birth it appeared to its contemporaries to be "ill-shapen." By the careful and painstaking criticism of those physicians who have studied it honestly and practically, and by the hostile criticisms and objections of those physicians who are prejudiced against it, and have only studied it cursorily and theoratically, this new "birth of time" is being moulded and modelled into the perfection of beauty and usefulness.

The practical part of HAHNEMANN'S medical "innovation" consists of:—

1stly. A Reform of the Materia Medica on a Physiological basis.

2ndly. A deduction from experimental observations that the rule of drug administration is contained in the formula "Similia similibus curantur."*

3rdly. That medicines given in accordance with the above rule must be given in minute doses.

4thly. That all disease, which cannot be traced to a "manifest exciting or maintaining cause," is due to a depression, loss of power, or loss of balance, of "vital force." That disease is, in fact, dynamic and immaterial.

I shall pass over Hahnemann's subsequent "Psora" theory, and also the theories by which he sought to explain the action of Homœopathic medicines. A consideration of these theories is foreign to my present purpose, and would demand more space than I have at my disposal. I shall, therefore, content myself by stating that by far the greater part of the physicians who are practising Homœopathy adhere to the above four propositions. By the subjoined slight modification of the 2nd and 3rd propositions, I believe we should embrace the whole.

To the 2nd we should add:

That "our knowledge of the curative power of medicines is founded upon the property which they possess of causing, in the healthy body, symptoms similar to those of the disease to which they are correlated;"

And that "the cure of a disease is best effected by the administration of that drug which produces, in the healthy body, those objective and subjective symptoms which most nearly correspond to the symptoms of the disease itself, including both the sufferings of the patient and the pathological changes present."

To the 3rd proposition we should add:

That "the remedy chosen in accordance with the formula, 'similia similibus curantur,' should be administered in a dose which, while large enough to control or extinguish the symptoms of the disease, should not be so large as to disturb the patient, or to induce any pathogenetic (*i. e.*, disease-producing) symptoms."

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* Dr. Sharp has ably contended, in his well-known "Essays on Homœopathy," for the limitation of the Formula, S.S.C. to drug action.

So far as I know, the practice of all physicians practising Homœopathy is based upon the above four propositions, and the appended explanation. Some physicians give dilutions even more infinitesimal than those employed by Hahnemann. Others give minute doses of the crude drug, or strong tinctures; but all admit that therapeutics must have a physiological basis; that the rule for the selection of a remedy is the formula of similars; that the doses of specific remedies must be minute, and that disease is a failure of vital force.

There are about 270 physicians and surgeons in Great Britain holding these views.

Modern Medicine and its Approaches towards Homœopathy.

Modern Medical Science is trending in the direction of two out of the four propositions laid down in the preceding chapter as embodying the principles of Homœopathy.

A growing conviction is coming over the whole medical profession that disease is atonic or adynamic. What is this but an admission of Hahnemann's theory that disease is, for the most part, a derangement, depression, or loss of vital force.

In an introductory clinical lecture, printed in the *Medical Times and Gazette*, November 2nd, 1861, Dr. T. K. Chambers says:—

> "Disease is, in all cases, not a positive existence, but a negative, not a new excess of action, but a deficiency; not a manifestation of life, but a partial death; and therefore the business of the physician is, directly and indirectly,

not to take away material, but to add ; not to diminish function, but to give it play ; not to weaken life, but to renew life."

Dr. Bence Jones advocates a somewhat similar view in his Croonian Lectures on "Matter and Force," delivered before the London College of Physicians in 1868. He assumes Vital Force to be Chemical Force, to which he traces all the operations of life. The treatment of disease according to his view consists in regulating the processes of Oxidation and of Nutrition. His theory is that Matter and Force are indivisible, that a perfect union exists which binds them indissolubly, but that during molecular changes the force becomes active from the new Chemical combinations it assumes. This represents organic life in his scheme.

This idea differs from Hahnemann's "vital force" theory, but its tendency, together with that of all the other progressions of medical science, is decidedly in the direction of the Homœopathic theory, that disease is imponderable, and a derangement of "dynamics," *i.e.*, that it consists in a loss of balance of vital force, and is to be restored by the restoration of balance. Another equally decided and important change in the direction of medical thought towards Homœopathy is the adoption of Hahnemann's dictum, that the "totality of the symptoms," subjective and objective, constitute the disease. In Dr. Russell Reynolds' system of medicine this proposition is adopted bodily. Many paragraphs in his Introduction read as if they were simply a commentary on the "*Organon*;" for example, on p. 3 we read :—

"It is difficult to arrive at any other definition of "*disease*" than that it is the sum total of morbid changes in both function and structure ;" and again, (p. 11), "We cannot know of the existence during life of any disease except by its symptoms ; we cannot conceive of disease apart from some recognizable changes in either function or structure ; and these changes constitute the disease ; nor can we, on the other hand, imagine the existence of what we call 'symptoms' apart from the correlative idea of what we conceive to be 'disease.'"

The practical bearing of the first of these two extensions of the Homœopathic idea has become very marked. Where in Hahnemann's time the ordinary practice was to bleed, leech, or blister; in our own time physicians treat the same diseases by food and stimulants. For this great revolution in medical practice; for the salvation of human life and the mitigation of human suffering it includes, the profession and the public are indebted to Hahnemann and Homœopathy.

There is some present danger lest by the injudicious overdosing by stimulants, inexperienced and incautious physicians should induce Alcoholism, and all its train of attendant evils, in place of the natural disease; but experience will soon correct this error. In every sense the present practice of ordinary medicine is infinitely in advance of the old.

My personal experience includes both, and I can, therefore, speak of what my own eyes have seen and my own hands have handled. I record the days when I treated inflammation of the lungs in the fashion of the day, by bleedings, by blisterings, and large repeated doses of calomel and opium. I can contrast this treatment, and all its attendant miseries, with the more gentle and beneficent treatment of the present; and I feel the deepest gratitude that so great and beneficent a reform has been effected in Medical Science.

The next great approach to the scientific teachings of Homœopathy is the general admission, on the part of the leading physicians of the age, that the *Materia Medica* must be remodelled on a physiological basis.

It is thus proposed to found the new science of therapeutics on the same basis upon which Homœopathy stands; *i. e.*, on a knowledge of the pure effects of medicinal drugs, ascertained by experimental observations of their action when administered to the healthy body.

To those physicians who have already studied this subject practically it seems impossible that a full acquaintance with the physiological properties of drugs on the one hand, and a clear knowledge of the natural history of disease on the other, can lead to any other termination than the adoption of Homœopathy. When these two developments of medical science have been carefully followed out by experimental observations, the scientific labours of Hahnemann and his followers cannot fail to be appreciated and acknowledged by the whole profession.

So far as these experiments have been carried hitherto by men of the ordinary schools, they have corroborated Hahnemann's statements in a remarkable manner.

For example, one of the many stumbling blocks to the reception of HAHNEMANN's *Materia Medica* is found in the apparent improbability that the *duration of action* of each drug shall be counted by days or weeks. When a physician gives a dose of mercury, or of sulphur, he is inclined to assume that its action ceases within a few hours, or a day or so, at the most. HAHNEMANN, on the other hand, speaks of the effects of mercury, in large doses, acting for weeks, months, years, or even for life; of calcarea carb. upwards of 50 days; of arsenic 36 to 40 days, and so on—meaning that it will be weeks, months, or years, before *mercury* will be eliminated from the system, and in some cases it will never be got rid of, when it has been given in large or frequently repeated doses; that it will be "50 days or upwards" before *calcarea* will be fully cast out of the system, when large doses have been taken, and that large doses of arsenic will remain in the living body from 36 to 40 days before it is fully eliminated.

These statements seem incredible to those who have not studied the subject. If they are true, to what an unnecessary prolongation of unhealth must all patients be subjected who are treated by ordinarily large doses of medicinal drugs. This "duration of action" of drugs is accepted by ordinary practitioners as a heavy indictment against the large dose system. Hence it has been treated by them as if it were false.

Yet modern medical experience confirms these statements. In the *Croonian Lectures* alluded to above, Dr. BENCE JONES details some experiments which give a strong probability (to say the least) in favour of Hahnemann's exactness and accuracy. Corroborating his observations that medicinal drugs may induce morbid symptoms in all the structures and organs of the body; and also that each drug acts for a long time after its administration. On p. 86 (op. cit.) the author says :—

> "For want of more definite knowledge we are almost tempted to assume that medicines have an elective affinity which determines the place where they will act.
>
> "If, however, it can be shewn that most medicines pass into every texture of the body, and carry with the matter whatever force they possess, then it follows that our present ideas of the local action of medicines are far too restricted.
>
> "The experiments which I have published in the *Proceedings of the Royal Society*, June 15th, 1865, on the rate of the passage of lithium into and out of the vascular and non-vascular textures, shows the rate at which chloride of lithium passes into the textures through the stomach of the guinea-pig."

In the table which follows these paragraphs it is shown that three days after the administration of 1½ grains of chloride of lithium, it was found everywhere in the body. In another experiment, 3 grains were given, and, in 15 minutes it was found in every tissue except the lens. In a third, 3 grains were given, and in 2½ hours it was found in every tissue of the body including the lens. In another experiment 3 grains were given, and 33 days after traces of it were still found in the lens; while for 30 more days it was found in the secretions. Hence the action of this one dose was proved by the test of spectrum analysis to have continued to act for 63 days. On p. 89 the same author says:—

> "Sulphate of thallium was also shewn, by spectrum analysis, to pass into all the vascular and non-vascular textures, and even sulphate of silver was traced in almost every texture.
>
> "In the *Proceedings of the Royal Society*, April 12, 1866, Dr. Dupré and I further showed that four grains of sulphate of quinine passed in fifteen minutes into every texture of the guinea-pig, and was detectable for forty-eight hours.
>
> "If we had sufficiently delicate modes of detecting other substances, it can hardly be doubted that they would follow the same law, and be found to pass rapidly into every texture."

These and other similar experiments cannot fail to lead to great results. They demonstrate beyond possibility of disproof the extreme rapidity of drug-action, even on distant tissues. They prove the permeability of every tissue in the body, and the penetrating power of medicinal drugs. They prove also the long "duration of action" of medicinal drugs.

And all these proofs confirm the truth of Hahnemann's experiments and the reasonability and probability of the Homœopathic theories and practice.

When men like Dr. Acland, Regius Professor of Medicine in the University of Oxford; Sir Thomas Watson, late President of the College of Physicians; Dr. Bence Jones, Dr. Harley, and other prominent physicians adopt the first principles of Homœopathy in experimenting into the pure effects of medicinal drugs on the healthy body, we may fairly assume that modern medicine is taking a decided movement in the direction of Homœopathy. Having proved and admitted certain of the principles upon which the Homœopathic practice is founded, there is little doubt but that the time is fast approaching when a more extended enquiry into the results of its practice must and will be conceded to it.

I trust the above few pages may do some part towards the spread of a knowledge of what has been proved practically to be a great medical truth, and I am willing, at all times, publicly or privately, to demonstrate to any professional enquirer the truth of the propositions I have upheld in them. Although I have deduced arguments from observed facts, yet I would say with the philosopher of Geneva, I know that truth resides in the facts, not in my mind which observes them; and that I shall be the nearer the truth the less I indulge in theories of my own. In medicine, as in all His kingdom, may God speed the right.

Conclusion.

Medicine is emphatically a science of experience, and should be judged by experimental observation. The true physician is he who owns no sect, but is ever open to "prove all things, and hold fast that which is good." There ought to be no sect, neither "Allopath," nor "Homœopath," in medicine, but simply *physicians*, "whose high and only mission is to restore the sick to health, to cure, as it is termed."*

It is the fashion with some of its medical opponents to style Homœopathy a medical heresy. To speak of orthodoxy "or heresy" in medicine is an absurdity. We might as well speak of "orthodox" mechanics, or orthodox chemistry, or orthodox astronomy, as of orthodox medicine. Where, from the very nature of things, there is not, nor can be a *creed*, there can be neither orthodoxy nor heresy.

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† Hahnemann's *Organon.*

Medical systems must be tried by the test of experience and by the light of the collateral sciences, and until these sciences are fully known, and the whole scheme of creation is fully comprehended by us, medicine must remain an inexact science, without creed or high priest.

Whether man, the Finite, will ever arrive at a perfect knowledge of the works of God the Infinite, it is beyond our province here even to speculate. We know that at present all our knowledge is but little, and consists of oft-broken threads.

It little becomes physicians to arrogate to themselves the possession of a knowledge and power which they do not possess, for, of all the sciences, medicine is perhaps the least certainly known; and the arcana of life and death are as yet a great mystery.

It is, therefore, befitting that we should comport ourselves (as we truly are) as students in the great university of nature, humbly advancing along our common road of knowledge, and adopting the advice given by John Hunter to Jenner—"Don't think, but try; be patient, be accurate."

I may be expected to say a few words on the present position of Homœopathy among physicians in England. The following is a short summary of its status. There are about 270 legally qualified and registered medical practitioners in Great Britain and Ireland, who have carefully experimented into the science of Homœopathy, and who have, in consequence, adopted it openly into their practice. There is also a considerable number of men, of less moral courage, who are secretly practising the system, but who hesitate to avow their faith in it while it is only supported by a minority.

These medical practitioners and their lay supporters promulgate their principles through two quarterly and three monthly journals. *The British Journal of*

Homœopathy (the oldest medical quarterly in England), *The Annals of the British Homœopathic Society*, *The Monthly Homœopathic Review*, *Notes of a New Truth*, and *The Homœopathic World.*

There are six societies for scientific discussion, among them, *The British Homœopathic Society*, *The Northern Homœopathic Medical Association*, *The Midland Homœopathic Medical Society*, *The Liverpool Homœopathic Medico-Chirurgical Society*, *The Cheltenham Hahnemann Medical Club*, and *The Northumberland and Durham Homœopathic Medical Association.*

They have four hospitals: *The London Homœopathic Hospital*, a small hospital in *Bath*, and two very rising hospitals, the one in *Birmingham*, and the other at *Doncaster.*

They also carry on 70 dispensaries for the treatment of the poor; a very large amount of public and gratuitous work, when we consider that it has to be carried on by 270 practitioners. It offers a strong testimony in favour of their activity and benevolence.

It is beyond my intention to review the position of this science on the Continent and in other parts of the world. I would merely add, that everywhere it is advancing, both within and without the profession. The most recent and important medical news from Paris tells us that "the Minister of Public Instruction in the Imperial Cabinet has directed a course of lectures on *Homœopathic Medicine* to be delivered at the Sorbonne. M. Lèon Simon has been appointed to the lectureship."*

We hope that the medical profession in England will not long remain without a similar opportunity for the attainment of public instruction in this comparatively new branch of medical science.

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* Monthly Homœopathic Review, *February*, 1869.